PTO/SB/05 (08-03) Approved for use through 07/31/2006. OMB 0651-0032

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UTILITY	Attorney Docket No.			
OTILITI	****	Y		

UTILITY
PATENT APPLICATION
TRANSMITTAL

Attorney Docket No.		
First Inventor	Sang Hoon Woo	PT(
Title	Intestinal bypass device	J.S.
Express Mail Label No.		

(Only for	new nonprovisional applications under 37 CFR 1.53(b))	Express Mail Label No.			
See MPEP	APPLICATION ELEMENTS chapter 600 concerning utility patent application contents.	ADDRESS TO: Commission P.O. Box 1	Patent Application CV oner for Patents CV 450 VA 22313-1450		
(Submi Applic See 3 Applic See 3 Specif (prefer - Desc - Cross - State - Refer - Back - Brief - Detai - Clairr - Abstr 4. Drawii 5. Oath or Dec a. V Ne b. Co (for i	act of the Disclosure ng(s) (35 U.S.C. 113) [Total Sheets8]	ii. Paper c. Statements verifying ACCOMPANYING AP 9. Assignment Papers (cov. 37 CFR 3.73(b) Statemen (when there is an assign. English Translation Document (IDS)/PTO-14 (IDS)/PTO-14 (IDS)/PTO-14 (IDS)/PTO-14 (IDS)/PTO-14 (IDS)/PTO-15 (IDS)/PTO-16 (IDS)/PTO-16 (IDS)/PTO-16 (IDS)/PTO-17 (IDS)/PTO-18 (IDS)/PTO-19 (I	idix) Sequence Submission Form (CRF) Ince Listing on: D-R (2 copies); or identity of above copies PLICATION PARTS er sheet & document(s)) Int		
18. If a CONTINUING APPLICATION, check appropriate box, and supply the requisite information below and in the first sentence of the specification following the title, or in an Application Data Sheet under 37 CFR 1.76: Continuation Divisional Continuation-in-part (CIP) of prior application No.: Prior application information: Examiner Art Unit: For CONTINUATION OF DIVISIONAL APPS only; The entire disclosure of the prior application, from which an eath or declaration is supplied under Box					
	d a part of the disclosure of the accompanying continuation on <u>can only</u> be relied upon when a portion has been inadve	rtently omitted from the submitted applica			
	19. CORRESPON	IDENCE ADDRESS			
Custon	ner Number:	OR Corres	pondence address below		
Name	Sang Hoon Woo, MD				
Address	5208A Penrith Drive	111a			
City	Durham	State NC	Zip Code 27713		
Country		Telephone (919) 544-1070	Fax		
Name (Print/Ty	(pe) Sang Hoon Woo	Registration No. (Attorney/Agent)			
Signature	In wo	·	Date /0/16/03		

This collection of information is required by 37 CFR 1.53(b). The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Mail Stop Patent Application, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450. If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

Th PTO did not receiv the following listed item(s) Application Data Sheet

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PTO/SB/17 (10-03)

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Effective 10/01/2003. Patent fees are subject to annual revision.

Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYME	ENT
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Complete if Kn wn			
Application Number			
Filing Date	10/27/03		
First Named Inventor	Sang Hoon Woo		
Examiner Name			
Art Unit			
Attorney Docket No.			

METHOD OF PAYMENT (check all that apply)			FEE	CALCULATION (continued)		
Check Credit card Money Other None	3. A[DITIO	ONAL	. FEE	S	
Order - Order	<u>Large E</u>	ntity	Small	Entity		
Deposit Account:	Fee	Fee (\$)	Fee Code	Fee (\$)	Fee Description	Fee Paid_
Deposit Account	Code 1051	(\$) 130	2051	• •	Surcharge - late filing fee or oath	VO I MICE
Number Deposit	1052	50	2052		Surcharge - late provisional filing fee or	
Account					cover sheet	
Name The Director is authorized to: (check all that apply)	1053	130	1053		Non-English specification For filing a request for ex parte reexamination	
X Charge fee(s) indicated below X Credit any overpayments	1812		1812	_,	Requesting publication of SIR prior to	
Charge any additional fee(s) or any underpayment of fee(s)	1804	920*	1804	920-	Examiner action	
Charge fee(s) indicated below, except for the filing fee	1805	1,840*	1805	1,840*	Requesting publication of SIR after	
to the above-identified deposit account.	4054	110	2254	66	Examiner action Extension for reply within first month	
FEE CALCULATION	1251	110	2251 2252	55 210		
1. BASIC FILING FEE	1252	420	2252	_	Extension for reply within third month	
Large Entity Small Entity	1253	950 1,480	2253	740		
Fee Fee Fee Fee Paid Code (\$) Code (\$)	l .	•	i		Extension for reply within fifth month	
1001 770 2001 385 Utility filing fee 385		2,010	2255			
1002 340 2002 170 Design filing fee	1401	330	2401		Notice of Appeal	
1003 530 2003 265 Plant filing fee	1402	330	2402		5 Filing a brief in support of an appeal	
1004 770 2004 385 Reissue filing fee	1403	290	2403		5 Request for oral hearing	
1005 160 2005 80 Provisional filing fee	1	1,510	1451		Petition to institute a public use proceeding	
SUBTOTAL (1) (\$) 385	1452	110	2452		5 Petition to revive - unavoidable	
		1,330	2453		5 Petition to revive - unintentional	
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE		1,330	2501		5 Utility issue fee (or reissue)	
Extra Claims below Fee Paid	1502	480	2502		D Design issue fee	
Total Claims 33 -20** = 13 × 9 = 117	1503	640	2503) Plant issue fee	
Claims ————————————————————————————————————	1460	130	1460		0 Petitions to the Commissioner	
Multiple Dependent	1807	50	180	-	0 Processing fee under 37 CFR 1.17(q)	ļ
Large Entity Small Entity	1806	180	180		0 Submission of Information Disclosure Stmt	
Fee Fee Fee Fee Description Code (\$)	8021	40	802	21 4	Recording each patent assignment per property (times number of properties)	
1202 18 2202 9 Claims in excess of 20	1809	770	280	9 38	5 Filing a submission after final rejection	
1201 86 2201 43 Independent claims in excess of 3	""				(37 CFR 1.129(a))	
1203 290 2203 145 Multiple dependent claim, if not paid	1810	770	281	0 38	5 For each additional invention to be examined (37 CFR 1.129(b))	
1204 86 2204 43 ** Reissue independent claims over original patent	1801	770	2801	ı 38		
the principle of the survey of 20	1802					
1205 18 2205 9 ** Reissue claims in excess of 20 and over original patent			1	3.	of a design application	
SUBTOTAL (2) (\$) 117		•	pecify)			
**or number previously paid, if greater; For Reissues, see above *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$)						
					(Complete (if applicable))	
SUBMITTED BY						

wos Date Signature WARNING: Information on this form may bec m public. Credit card information hould not be includ d on this form. Provid credit card information and authorization on PTO-2038.

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Name (Print/Type)

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Registration No.

(Attorney/Agent)